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RESPONSE UNDER 37 C.F.R. § 1.116 EXPEDITED PROCEDURE

TC/ART UNIT 2155

00862.003158

PATENT APPLICATION

)		FEB 1 0 2004
:	Examiner: Y.N. Won	1 1 1
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:	TC/Art Unit: 2155	2-9-04
)		3-9-04
	) : ) :	) : Examiner: Y.N. Won ) : TC/Art Unit: 2155

Application No.: 09/452,188

Filed: December 2, 1999

For: COMMUNICATION APPARATUS AND METHOD

February 10, 2004

Commissioner for Patents

Mail Stop: AF P.O. Box 1450

Alexandria, VA 22313-1450

#### AMENDMENT AFTER FINAL ACTION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Sir:

In response to the Office Action dated November 10, 2003, the Examiner is respectfully requested to amend the above-identified application as follows:

> I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office (Fax No. 703-872-9306) on

> > February 10, 2004

(Date of Transmission)

ock See Yu-Jahnes (Reg. No. 38,667)

(Name of Attorney for Applicant)

February 10, 2004

(Date of Signature)

FEB 1 0 2004

# FITZPATRICK, CELLA, HARPER & SCINTO

30 Rockefeller Plaza New York, NY 10112-3801 (212) 218-2100

Facsimile:(212) 218-2200

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### FACSIMILE COVER SHEET

TO: Examiner Y.N. Won

USPTO - TC/Art Unit 2155

FROM: Lock See Yu-Jahnes (Reg. No. 38,667)

RE: U.S. Patent Appln. No. 09/452,188

Attorney Docket: 00862.003158

FAX NO.: 703-872-9306

DATE: February 10, 2004

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#### MESSAGE

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February 10, 2004

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ock See Yu-Jahnes (Reg. No. 38,667

(Name of Attorney for Applicant)

February 10, 2004

(Date of Signature)

(AF)

after final

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In rc Application of:

Docket No. 0862.003158

SHOICHI YAMAGUCHI

Application No.: 09/452,188

Examiner: Y.N. Won

Filed: December 2, 1999

TC/Art Unit: 2155

For: COMMUNICATION APPARATUS AND METHOD

Date: February 10, 2004

COMMISSIONER FOR PATENTS

Mail Stop: AF P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

		C	LAIMS AS AMEN	IDED		-
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 18	MINUS	20	- 0	x \$9 \$18	0
INDEP. CLAIMS	* 3	MINUS	***	= 0	x \$43 \$86	0
Fee for Multiple Dependent claims \$145°/\$290					0	
			TOTAL ADDITI			   0

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\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

"Verified Statement claiming small entity status is enclosed, if not filed previously.

Page 1 of 2

	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,

Registration No.

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

Form #120

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